

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR

BEACONSFIELD URBAN DISTRICT

For the Year 1912.

WYCOMBE :

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BEACONSFIELD URBAN DISTRICT.

Medical Officer's Annual Report to the Beaconsfield Urban District Council.

Mr. Chairman and Gentlemen,—

I have the honour of presenting to you my Twelfth Annual Report on the Sanitary condition and general health of the town for the year ending December 31st, 1912.

It is not quite so copious as many of its predecessors, but that lies in the fact that during the past few years many improvements have been made and suggestions carried out; for instance, the water supply is better, the street lighting advanced, the chief roads are greatly improved, and the Sanitary arrangements of nearly all the cottages have undergone a veritable transformation.

Moreover, we have a more proficient Fire Brigade, led by an energetic Captain, and improvements in equipment, including a small fire engine loaded with chemical extinguishing fluid.

All these mark distinct progression. What used to be looked upon by visitors to Beaconsfield twenty, or even twelve, years ago, as a rural part of England, is now a town with prospects of extension and amalgamation with surrounding villages to form one large community.

The main topics for consideration and work to be carried out in the immediate future are:—The New Town Sewerage Scheme, Town Planning, and Housing of the Working Classes.

TABLE OF POPULATION FOR LAST 10 YEARS WITH BIRTHS AND DEATHS.

	Year.	Population.	Births.	Deaths.
	1903	1594	49	21
	1904	1617	40	30
	1905	1631	42	21
	1906	1660	38	11
	1907	1674	43	23
	1908	1704	51	24
	1909	1738	62	20
	1910	2296	54	15
Census	1911	2511	72	20
	1912	2605	69	29

The estimated population for the year 1912 comes out at 2,605.

Birth rate per 1,000 population is 26.4.

Death rate per 1,000 population is 11.1.

Infantile mortality, calculated on per 1,000 births, is 70 per 1,000 births.

TABLE OF DEATHS AT DIFFERENT AGES.

Under 1 year	6
1 year and under 5 years	2
5 years and under 15 years	Nil
15 years and under 25 years	1
25 years and under 45 years	2
45 years and under 65 years	9
65 years and over	9

The ages of those over 65 were respectively 76, 70, 74, 74, 67, 76, 77, 74, and 89.

It will be seen by the foregoing table that by far the larger proportion of deaths occurred in persons between the ages of 45 and 89, nine of whom were over 70 years of age.

The Infantile Mortality compares favourably with the general rate for the country. Climatic conditions and epidemics on the one hand, hygiene and healthy surroundings, together with personal care on the other, have much to do with the rise and fall of the death rate of a community.

TABLE OF BIRTHS IN EACH MONTH.

Month.	Male.		Female.	Total.
January	4	.....	2	6
February	3	.....	4	7
March	5	.....	2	7
April	1	.....	2	3
May	2	.....	2	4
June	3	.....	3	6
July	Nil	.....	1	1
August	7	.....	3	10
September	Nil	.....	3	3
October	5	.....	2	7
November	5	.....	5	10
December	2	.....	3	5

There were 69 births, 37 being males and 32 females, making an excess of 5 males over females.

Last year there was an excess of 10 females.

TABLE OF DEATHS IN EACH MONTH.

Month.	Male.	Female.	Total.
January	2	Nil	2
February	2	3	5
March	1	2	3
April	Nil	Nil	Nil
May	3	1	4
June	3	1	4
July	1	Nil	1
August	Nil	1	1
September	2	2	4
October	1	1	2
November	1	1	2
December	1	Nil	1

INFECTIOUS DISEASES.

During the year there has been a considerable amount of infectious diseases, the chief being Measles, Chicken Pox, and Whooping Cough, the latter accounting for one death. These diseases, however, are those which attack every community, and are popularly called children's complaints. Among the notifiable diseases, Scarlet Fever, Tuberculosis, and Erysipelas have been prominent, but by no means in an epidemic form, single cases being notified at various intervals. During the year several cases of Scarlet Fever have been notified, and although the number is above the average of past years, it is not to be wondered at when we take into consideration the rapidly increasing population and the constant transit to and from London and other largely populated and perhaps infected areas.

It must be remembered that these diseases may be carried in clothing, air, and persons convalescent, and apparently free from disease travelling in public conveyances.

When an infectious case has been reported I have immediately visited the house of the patient, and given full instructions for the prevention of the spreading of the disease. Moreover, on the termination of the disease the apartment has been thoroughly disinfected, orders for re-decorating given, and in cases where it has been considered necessary, clothing destroyed and compensation allowed should the case be a necessitous one.

The results have been highly satisfactory, both from preventing the spreading of the disease and at the lowest possible cost to the rates.

Cancer has been the cause of three deaths during the year, the disease affecting the prostate, lip, and intestines respectively.

In each case every precaution was taken, the patient's room being thoroughly disinfected, and personal clothing destroyed.

In neither of these cases was there a history of Cancer in the family, neither could any definite cause be found, except, perhaps, the fact that in the lip case the man was in the habit of smoking a clay pipe, and this is well known to be an irritating cause.

Although during the past two years there has been an increased percentage, yet again we must remember that the population has nearly doubled since the advent of the new railway, and some are, consequently, of an imported nature.

A large amount of money has been invested in this and other countries during the past few years, and the lives of enthusiastic experts endangered and even lost in the research of Cancer and its origin. Many theories have been expounded, and treatment recommended, but with little or no success. We have still to learn the true cause and effective treatment of one of the most loathsome diseases of advancing years.

TUBERCULOSIS.

Tuberculosis, including Phthisis and Tuberculosis of other organs:—Five cases have been notified and four deaths registered during the year.

As you all know, there is an active crusade against this greatest scourge of the human race.

Advancements are being made every year in preventing and treating it.

Firstly, by notification, which, under the different Tuberculosis Notification Acts, now reaches to every class of society.

Secondly, by treatment in Sanatoria, which should be a great advantage, and has been promised to all insured persons under the Insurance Act, who might become infected.

Thirdly, by domiciliary treatment, under supervision, or domiciliary treatment after leaving Sanatorium. In this direction Sanitary Authorities and Boards of Guardians have a distinct responsibility to provide Shelters, treatment, and nursing. But although this responsibility is laid on their shoulders, and many have announced their willingness to do so, the infected persons or their relatives will not willingly accept the offer.

Fourthly, by improved means of diagnosis and treatment.

All the foregoing is a distinct advancement during the past few years.

But the segregation of the diseased from the healthy, and the subsequent supervision of the latter, the attention to better hygienic surroundings of the poorer classes, more light, more ventilation, better food, and better sanitary condition of the homes, more attention to personal cleanliness, etc., are among the rudimentary prophylactic means against the disease.

I have often said before that a pure milk and meat supply, insured by periodical inspection and registration of cattle, is an important matter, and this was borne out by the final Report of

the Royal Commission, July, 1911, and commented upon in last year's Annual Report.

On June 11th, 1912, I attended the Conference on Tuberculosis at Aylesbury, convened by the Bucks County Council.

A discussion took place on the Interim Report of the Departmental Committee on Tuberculosis, National Insurance Act.

A digest of the general discussion is as follows:—

I.—The appointment of a Chief Tuberculosis Officer for the County. (More than one was suggested, but I opposed this).

II.—The erection of one or more Sanatoria in the County for the treatment and instruction of cases; these buildings to be of such a character as to be quite adequate at the least expense.

The general opinion was not to use the money at disposal on costly brick buildings, but if it became compulsory, through the Act, to combine with Berks and Oxfordshire.

III.—The formation of Centres or Dispensaries, where patients could be sent or taken by their Medical Attendant, and thus have the advantage of discussing with, and advice of, the Medical Officers at these Dispensaries, and the Chief Medical Officer for the County.

IV.—The provision of Shelters for the patients in each district, under the supervision of the Medical Officer of Health for the district, the District Nurse, and the General Practitioner who generally attends the patient; these patients having been under treatment and instructions at the County Sanatorium in order that they may the better be able to carry out the general principles of treatment and living.

V.—The formation of a Laboratory for the County, so that bacteriological examination of sputa, etc., may be carried out.

It was decided that the appointment of Health Visitors was unnecessary, and residential Educational Schools were too expensive.

A certain sum of money, according to the population of the County, will be granted by the Insurance Commissioners for the erection of Sanatoria, and a certain sum annually for upkeep and general expenditure.

It was suggested that the expenditure of the sum for Sanatoria Benefits be under the control of the County Council in conjunction with the Insurance Committee.

TABLE OF CAUSES OF DEATHS, WITH AGES.

Causes.	Ages.
Marasmus and Convulsions	25 days.
Bronchitis	1 month (inquest), 62 yrs., 74 yrs.
Laryngismus Stridulus	1 yr.
Arterio Sclerosis	77 yrs.
Whooping Cough	6 months.
Senile Decay	89 yrs., 76 yrs., 74 yrs., 70 yrs.
Pneumonia	7 months.

Cerebral Hæmorrhage	...	...	...	...	...	...	...	51 yrs.
Tubercular Meningitis	...	...	...	...	...	...	...	9 months.
Pulmonary Tuberculosis	...	...	...	...	...	...	36 yrs.,	54 yrs.
Parturition (Pulmonary Apoplexy)	...	...	...	...	...	...	...	38 yrs.
Hemiplegia	...	...	...	...	...	...	...	74 yrs.
Duodenal Ulcer	...	...	...	...	...	...	...	49 yrs.
Premature Birth (twins)	...	...	...	...	...	...	...	16 hours.
Heart Disease	...	...	...	...	...	...	...	67 yrs.
Kidney Disease	...	...	...	...	...	60 yrs.,	47 yrs. (Septic).	
Tubercular (Intestines)	...	...	...	...	...	...	...	19 yrs.
Cancer, Lip	...	...	...	...	...	...	...	58 yrs.
Cancer, Colon	...	...	...	...	...	...	...	45 yrs.
Cancer, Prostate	...	...	...	...	...	...	...	76 yrs.
Stricture Œsophagus	...	...	...	...	...	...	...	46 yrs.
Influenza	...	...	...	...	...	...	...	2 yrs.

THE SCHOOLS.

Beaconsfield Schools have been visited during the year, and improvements in the heating arrangements carried out.

The Sanitary arrangements are, however, not good, and there is no doubt the w.c.s should be connected with the main drainage, and have automatic flushing apparatus.

The Educational Medical Officer for the County has paid visits to the Schools, and inspected the scholars, with the result that many were referred to their respective Medical Attendants for defective eyesight, throat troubles, eczema, and, in a few instances, personal dirtiness; in fact, two cases were reported to me and the condition of their homes also. These were found on inspection in a filthy state, and the landlords were consequently communicated with on the matter.

It has not been found necessary to close the Schools during the year for any of the epidemic diseases.

Taking the average, the general health of the School Children has been good. Great interest is taken in the children by the Masters and Mistresses, and if any child does not appear up to the mark in way of health, the parents are advised to seek advice, and the child is sent home.

DRAINAGE.

The Cesspool System has been a source of trouble at different times of the year, especially during the periods of rain, which, in a considerable number of cases helped to fill them, thus giving extra work to the men in charge of the Sewage Barrels, beside complaints of overflow, which could not be avoided owing to climatic circumstances and defective construction. I have before stated that owing to excessive rainfall, and consequent inflow of surface and land water, some of the cesspools fill up very quickly, and,

consequently, require more attention than they should, whereas, on the other hand, some only require emptying at quite long intervals. The increasing population necessitates an increasing amount of work put upon the men engaged on this work.

I trust that the completion of the Sewerage System in the Northern part of the town, which has been under consideration for some time, will soon be an accomplished fact, because it will not only be a great improvement and benefit to that part of the town, but the precursor of development in private roads and general advancement towards putting that part of the town on a firm, progressive basis.

It is gratifying to know that there has not been the amount of trouble with blocking of the Old Town Sewerage System with foreign bodies as in past years.

The automatic flushing w.c.s to cottage property in the Old Town continue to act satisfactorily.

The Council's Scavenger has carried out his work of removal of house refuse in an efficient manner. The ashes and house refuse are deposited in metal bins, with covers, ready, in most instances, for removal to the cart. It has been suggested that the dust carts should be provided with covers, so as to prevent the contents from blowing about the streets during transit to the Shoot.

WATER SUPPLY.

Water Supply is derived from the Amersham, Beaconsfield, and District Water Company. A considerable amount of work has been done by this Company by putting in new and larger mains, so as to improve the supply and increase the force to compete with the ever-increasing supply to new property.

COW-SHEDS, DAIRIES, &c.

During the year these have been inspected at varying intervals, and instructions given for re-limewashing, etc. They have been found in a satisfactory condition, and the quality of the milk up to the standard.

There is no milk sent to London from the farms in the district.

I must repeat the importance of supervision and regular inspection of milch cows by a Veterinary Surgeon. This was brought out most emphatically in the Final Report of the Royal Commission last year, and the danger emphasised by the very strong measures taken by the American Government of testing and examining and keeping a record of every beast allowed to be imported into their country from other countries.

I have received leaflets:—A, "To Farmers and Milk Producers." B, "To Distributors and Retailers of Milk." C, "To Housewives and all Consumers of Milk"—from the Board of Agri-

culture, and I propose that the Council should have some of these distributed in the coming year.

In July the Local Government Board issued a Memorandum on Foot and Mouth Disease. At this time the disease was, and had been, very prevalent in different parts of the country, but as far as I could ascertain, none had been reported in this district.

SLAUGHTER-HOUSES.

The Registered Slaughterhouses have been inspected and found to be conducted in a satisfactory manner.

BAKE-HOUSES.

The Bakehouses have also been periodically inspected, and found in a cleanly condition, good repair, and cleansed and lime-washed when required.

HOUSING WORKING CLASSES, &c.

This question has been fully discussed and reported upon last year, and suggestions made in previous Annual Reports.

During the past year cottage property has been inspected from time to time, and communications have been made with owners on any defects such as state of repairs, insufficient light and ventilation, over-crowding and filthy condition, and inadequate w.c. accommodation.

The Council have power to demolish all cottages reported unfit for habitation. In April two cottages in Wycombe End were condemned as unfit.

LIGHTING.

A considerable improvement in the lighting of some parts of the North part of the town has been carried out, but in many roads there is still room for improvement.

HEDGES, DITCHES, &c.

Hedges have been trimmed and ditches cleaned out, and, where necessary, deepened. I would like again to point out a very dangerous corner in the district—the bend at the bottom of Ledborough Hill; this really requires most serious consideration, or I fear some serious accident may occur.

METHODS OF DEALING WITH INFECTIOUS DISEASES.

I.—Isolation at home, when it is found safe and possible to do so.

II.—Removal to Hospital when unable to isolate at home satisfactorily.

III.—Disinfection of clothing, bedding, etc.

IV.—The disinfection of the rooms, or whole house, if necessary.

V.—Weekly return of all infectious diseases to County Council and Local Government Board on post cards provided for the purpose, and the receipt of tabulated returns from surrounding districts, and by the Local Government Board of the whole country.

VI.—The isolation of person in attendance and supervision of contact cases.

VII.—Use of Anti-toxins.

Appended to this Report are the Local Government Tables and a summary of the work done by your Sanitary Inspector in the Urban Sanitary District of Beaconsfield during the year 1912.

In conclusion I will take this opportunity of thanking Mr. Sargeant for his help and assistance in those branches of the Health Department in which I am engaged.

I am, Gentlemen,

Your obedient Servant,

ARTHUR H. TURNER,

Medical Officer of Health, Beaconsfield Urban District.

Leigh House, Beaconsfield,

March 29th, 1913.

BUCKINGHAMSHIRE COUNTY COUNCIL.

Summary of work done through the Sanitary Inspector in the Urban
Sanitary District of Beaconsfield during the year ended 31st
December, 1912.

I. NUISANCES.

1	Complaints received	...	...	...	...	...	...	17
2	Nuisances detected without complaint	...	...	...	...	...	...	29
3	Nuisances abated	...	...	...	...	...	...	46
4	Notices served	...	...	...	...	...	...	5
5	Summonses taken out	...	...	...	...	...	...	None
6	Convictions	...	...	...	...	...	...	None

II. HOUSING.

7	Houses inspected	...	...	...	...	...	...	22
8	Other premises inspected	...	...	...	...	...	...	None
9	Overcrowding abated	...	...	...	...	...	...	None
10	Houses closed	...	...	...	...	...	...	2
11	Closing Orders becoming operative	...	...	...	...	...	...	None
12	Demolition orders	...	...	...	...	...	...	2
13	Houses placed in habitable repair	...	...	...	...	...	...	2
14	Defects remedied without closing orders	...	...	...	...	...	...	2
15	Defects remedied after closing orders	...	...	...	...	...	...	None
16	Dirty houses cleansed	...	...	...	...	...	...	2
17	Closing orders determined	...	...	...	...	...	...	None
18	Houses represented as unfit for habitation	...	...	...	...	...	...	2

III. DRAINS, W.C.'s, PRIVIES, Etc.

New Work	{	19	Total defects found	..	..	..	..	4
		20	New drains laid	..	..	..	..	4
		21	Earth, pail closets or privies constructed.	..	..	..	..	None
		22	W.C.'s constructed	..	..	..	..	4
Old Work repaired	{	23	W.C.'s supplied with water	..	..	..	..	80
		24	Drains cleansed, repaired, re'aid, or ventilated	..	..	..	..	3
		25	Privies and W.C.'s repaired	..	..	..	..	None

IV. WATER SUPPLY.

New Work	26	Houses connected with water mains ..	10
	27	Samples taken for analysis	None
	28	"Certificates" granted } For Rural	None
	29	"Certificates" deferred } Districts only	
Old Work repaired	30	Cisterns cleansed, repaired, etc. .. .	None
	31	Wells cleansed or repaired	None
	32	Wells closed	None

REMARKS, &c.**V. FOOD.**

33	Seizure of unsound meat, etc.	None
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VI. SLAUGHTER HOUSES.

34	Number on Register	3
35	Number of inspections	39
36	Number of defects found	None
37	Number of cleansed limewashed, repaired, etc....	3

VII. BAKEHOUSES.

38	Number on Register	3
39	Number of inspections	39
40	Number of defects found	None
41	Number of cleansed, limewashed, repaired, etc.	3

VIII. DAIRIES, COWSHEDS, & MILKSHOPS.

42	Number of dairymen or purveyors of milk on register	1
43	Number of ditto registered during the year ..	None
44	Number of cowkeepers on register	3
45	Number of cowkeepers registered during the year	None
46	Number of visits made	48
47	Number of notices issued re cleansing, water supply, and sanitary defects	None

IX. WORKSHOPS.

48	Number on Register	6
49	Number of inspections	24
50	Number of defects found	None
51	Number of notices served re cleansing, overcrowding, sanitary defects, etc.	None

X. VARIOUS.

52	Removal of animals improperly kept	None
53	Visits to infected houses	23
54	Houses disinfected	10

XI. OTHER HEADINGS OR REMARKS.

HARRY SARGEANT.

TABLE I.

Vital Statistics of Whole District during 1912 and previous Years.

BEACONSFIELD.

Year.	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Un- cor- rected Number.	Nett.		Num- ber.	Rate.	Of Non- Residents registered in the District.	Of Resi- dents not registered in the District.	Under 1 Year of Age,		At all Ages.	
			Num- ber.	Rate.					Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1907	1674	43	...	...	23	13.7	...	...	...	139.5	23	13.7
1908	1704	51	...	...	24	14.0	...	...	...	19.6	24	14.0
1909	1738	62	...	...	20	11.5	...	...	...	32.0	20	11.5
1910	2296	54	...	...	15	6.5	...	...	...	129.	15	6.5
1911	2511	72	...	...	20	7.9	..	6	6	84.7	26	10.35
1912	2605	69	...	...	29	11.1	...	2	6	70.0	31	11.90

Total Population at all ages, 2,511.

Number of Inhabited Houses, 633.

Average Number of Persons per House, 3.9.

At Census, 1911 (cf. Census, Vol. V.)

TABLE II.

Cases of Infectious Diseases notified during the year 1912
URBAN DISTRICT.—BEACONSFIELD.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.							Total Cases removed to Hospital.
	At all Ages	At Ages—Years.						
		Under 1.	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years		65 and upwards
Small Pox	...	...	...	...	...	...	...	...
Cholera (C) Plague (P)	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	...	...	...	...	...	...	...	...
Erysipelas	4	...	...	...	2	2	...	...
Scarlet Fever	8	3	4	...	1	...	...	2
Typhus Fever	...	...	...	...	...	...	...	...
Enteric Fever	...	...	...	...	...	...	...	...
Relapsing Fever (R), Continued Fever (C)	...	...	...	...	...	...	...	...
Puerperal Fever	...	...	...	...	...	...	...	...
Cerebro-spinal Meningitis	...	...	...	...	...	...	...	...
Poliomyelitis	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis	5	...	1	...	2	2	...	...
Totals	17	3	5	5	5	4	2	2

ISOLATION HOSPITAL, HEDGERLEY LANE.

TABLE III.

Causes of, and Ages at Death during the Year 1912. Beaconsfield

Cause of Death.	Nett Deaths at the Subjoined Ages of "Residents" whether occurring within or without the District							Total Deaths whether of "Residents" or "Non-Residents" in Institutions in the District.
	All ages.	Under 1 year.	1 and under 2 years.	2 and under years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	
	2	3	4	5	6	7	8	
1								11
All causes { Certified Uncertified	29	...	...	...	...	...	...	29
1. Enteric Fever ...	...	...	...	...	...	...	...	...
2. Small Pox ...	...	...	...	...	...	...	...	...
3. Measles ...	...	...	...	...	...	...	...	...
4. Scarlet Fever ...	...	...	...	...	...	...	...	...
5. Whooping Cough ...	1	1	...	...	...	...	...	1
6. Diphtheria ...	...	...	...	...	...	...	...	...
7. Influenza ...	1	...	1	...	...	...	...	1
8. Erysipelas ...	...	...	...	...	...	...	...	...
9. Phthisis (Pulmonary Tuberculosis)	2	...	...	...	...	...	1	2
10. Tuberculous Meningitis ...	1	1	...	...	...	1	...	1
11. Other Tuberculous Diseases ...	1	...	...	...	...	...	...	1
12. Cancer, malignant disease ...	3	...	...	...	...	...	2	3
13. Rheumatic Fever ...	...	...	...	...	...	...	...	...
14. Meningitis ...	...	...	...	...	...	...	...	...
15. Organic Heart Disease ...	1	...	...	...	...	...	...	1
16. Bronchitis ...	3	1	...	...	...	...	1	3
17. Pneumonia (all forms) ...	1	1	1	...	...	...	...	1
18. Other diseases of respiratory organs ...	...	...	...	...	...	...	...	...
19. Diarrhoea and Enteritis...	...	...	...	...	...	...	...	...
20. Appendicitis and Typhlitis ...	...	...	...	...	...	...	...	...
21. Cirrhosis of Liver ...	...	...	...	...	...	...	...	...
21a. Alcoholism ...	...	...	...	...	...	...	...	...
22. Nephritis and Bright's Disease ...	2	...	...	...	...	...	2	2
23. Puerperal Fever ...	...	...	...	...	...	...	...	...
24. Other accidents and diseases of Pregnancy and Parturition...	...	...	...	...	...	...	1	1
25. Congenital Debility and Malformation, including Premature Birth ...	1	...	...	...	...	...	...	1
26. Violent Deaths, excluding Suicide	...	...	...	...	...	...	...	...
27. Suicide ...	...	...	...	...	...	...	...	...
28. Other Defined Diseases ...	6	1	...	...	...	...	3	6
29. Diseases ill-defined or unknown ...	4	...	...	...	...	...	...	4
	29	6	2			1	2	29

